

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION:	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		8/27/01
O.I.P.E. CLASSIFIER		49	9/31/01
FORMALTY REVIEW	VG	956	09/25/01
RESPONSE FORMALTY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	8/27/01
2	✓	✓	8/27/01
3	✓	✓	8/27/01
4	✓	✓	8/27/01
5	✓	✓	8/27/01
6	✓	✓	8/27/01
7	✓	✓	8/27/01
8	✓	✓	8/27/01
9	✓	✓	8/27/01
10	✓	✓	8/27/01
11	✓	✓	8/27/01
12	✓	✓	8/27/01
13	✓	✓	8/27/01
14	✓	✓	8/27/01
15	✓	✓	8/27/01
16	✓	✓	8/27/01
17	✓	✓	8/27/01
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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3/1/02  
04/25/01